

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000050723

FILED
Jul 11, 2005
Secretary of State

Entity Name: SCHANTZ FLORIDA, LLC

Current Principal Place of Business:

233 PABLO ROAD
PONTE VEDRA BEACH, FL 32082

New Principal Place of Business:

Current Mailing Address:

233 PABLO ROAD
PONTE VEDRA BEACH, FL 32082

New Mailing Address:

FEI Number: 20-1411987 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

BLOODWORTH, SUSAN S ESQ
170 MALAGA STREET
ST. AUGUSTINE, FL 32084 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM () Change (X) Addition
Name: SCHANTZ, FREDERICK W
Address: 233 PABLO ROAD
City-St-Zip: PONTE VEDRA, FL 32082 US

Title: MGRM () Change (X) Addition
Name: SCHANTZ, FREDERICK W
Address: 233 PABLO ROAD
City-St-Zip: PONTE VEDRA, FL 32082

Title: MGRM () Change (X) Addition
Name: SCHANTZ, FREDERICK W
Address: 233 PABLO ROAD
City-St-Zip: PONTE VEDRA, FL 32082

Title: MGRM () Change (X) Addition
Name: SCHANTZ, FREDERICK W
Address: 233 PABLO ROAD
City-St-Zip: PONTE VEDRA, FL 32082

Title: MGRM () Change (X) Addition
Name: SCHANTZ, FREDERICK W
Address: 233 PABLO ROAD
City-St-Zip: PONTE VEDRA, FL 32082

Title: MGRM () Change (X) Addition
Name: SCHANTZ, FREDERICK W
Address: 233 PABLO ROAD
City-St-Zip: PONTE VEDRA, FL 32082

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: FREDERICK W SCHANTZ

MGRM

07/11/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date